

## The Commonwealth of Massachusetts Department of State Colice

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## Request for Authorization to Acquire 1033 Program Equipment

Date:		
TheCoordinator's assistance the necessary information	in obtaining on to process	Department is requesting the 1033 Program State equipment screened through the 1033 program. Below is any requests:
Name of Agency:		
Address:		
Phone:		
Chief Executive Officia	l:	·
Point of Contact:		
No. of Full Time Office	re·	

applicable to equipment transferred as de-	e read and understand the terms and conditions etailed in the Memorandum of Agreement between the lify that a training plan is in effect to cover the use of all t.
The	Department has the ability to maintain, operate and the Program.
serviceable, this agency shall submit a le seeking assistance in the disposal, turn-in this agreement is for the current use of a nor issued for speculative uses or possible	acknowledge that all items received shall remain in this led. At such time that the items are no longer needed or of the Governor appointed State Coordinator in, or transfer of these items. Property available under authorized program participants and cannot be requested le future uses.  cordance with the Memorandum of Agreements
Chief of Police (print)	City/Town Executive Official (print)
Chief of Police (signature)	City/Town Executive Official (signature)